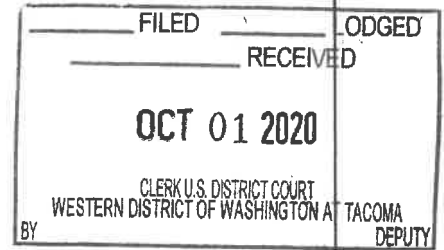


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UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF WASHINGTON

Brandon R Stephenson

CASE NO. 3:20-cv-05993-BHS
[to be filled in by Clerk's Office]

COMPLAINT FOR VIOLATION
OF CIVIL RIGHTS
(for use only by plaintiffs not in
custody)

Plaintiff(s),

v.

Jury Trial: ☒ Yes ☐ No

Kitsap County

WellPath

Defendant(s).

I. THE PARTIES TO THIS COMPLAINT

A. Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Brandon Stephenson
Street Address	3814 Eckmansville Rd
City and County	Winchester Adams
State and Zip Code	OH, 45697
Telephone Number	360-368-3757

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B. Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name Kitsap County

Job or Title (if known) Risk Management

Street Address 614 Division St

City and County Port Orchard Kitsap

State and Zip Code WA, 98366

Telephone Number 360-337-7101

☐ Individual capacity
 ☒ Official capacity

Defendant No. 2

Name Jonathan Ballard

Job or Title (if known) Lawyer for WellPath

Street Address 1325 Fourth Avenue, Suite 1500

City and County Seattle King

State and Zip Code WA, 98101

Telephone Number 203-800-2731

☐ Individual capacity
 ☒ Official capacity

Defendant No. 3

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

☐ Individual capacity
 ☒ Official capacity

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1 Defendant No. 4

2 Name

3 Job or Title (*if known*)

4 Street Address

5 City and County

6 State and Zip Code

7 Telephone Number

8 ☐ Individual capacity

☐ Official capacity

9 **II. PREVIOUS LAWSUITS**

10 Have you brought any other lawsuits in any federal court in the United States:?

11 ☒ No

☐ Yes

If yes, how many? _____

12 Describe the lawsuit:

13 _____
14 _____
15 _____
16 _____

17 Parties to this previous lawsuit:

18 _____
19 _____
20 _____
21 _____

22 Plaintiff(s)

23 _____
24 _____

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Defendant(s)

(If there is more than one previous lawsuit, describe the additional lawsuits on another piece of paper using the same outline. Attach additional sheets, if necessary)

Court and name of district:

Docket Number:

Assigned Judge:

Disposition: (For example, was the case dismissed as frivolous or for failure to state a claim? Was it appealed? Is it still pending?)

Approximate filing date of lawsuit:

Approximate date of disposition:

III. BASIS FOR JURISDICTION

Under 42 U.S.C. § 1983, you may sue state or local officials for the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." Under *Bivens*

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1 *v. Six Unknown Named Agents of Federal Bureau of Narcotics, 403 U.S. 388 (1971), you may*
 2 *sue federal officials for the violation of certain constitutional rights.*

3 A. Are you bringing suite against *(check all that apply)*:

4 ☐ Federal officials (a *Bivens* claim)

5 ☒ State or local officials (a § 1983 claim)

6 B. Section 1983 allows claims alleging the "deprivation of any rights, privileges, or
 7 immunities secured by the Constitution and [federal laws]." 42 U.S.C. § 1983. If you are
 8 suing under section 1983, what federal constitutional or statutory right(s) do you claim
 9 is/are being violated by state or local officials?

10 **The Eighth Amendment of the Constitution**

11 **Cruel and Unusual Punishment**

12 _____
 13 _____
 14 C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional
 15 rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are
 16 being violated by federal officials?

17 _____
 18 _____
 19 _____
 20 _____
 21 D. Section 1983 allows defendants to be found liable only when they have acted "under
 22 color of any statute, ordinance, regulation, custom, or usage, of any State or Territory
 23 or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983,
 24 explain how each defendant acted under color of state or local law. If you are suing

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under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

Jail medical staff was alerted of my medical conditions and medications I took by myself and my mother. They refused to provide me my medication. WellPath was the medical company contracted outside of Kitsap County Jail. Honorable Judge did not order proper medical treatment from anyone who worked in the jail.

IV. STATEMENT OF CLAIM

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

Kitsap County was in charge of ensuring WellPath, formerly known as Correct Care Solutions did their job to the fullest extent within guidelines of the law. They were supposed to

Continue Attachment 1

A. Where did the events giving rise to your claim(s) occur?

Kitsap County Jail in WA

B. What date and approximate time did the events giving rise to your claim(s) occur?

January 7th, 2016 - June 14th, 2016

C. What are the facts underlying your claim(s)? (For example: What happened to you?

Who did what? Was anyone else involved? Who else saw what happened?)

Not provided medical treatment nor fair judgement given circumstances by the Judge.

WellPath did not provide medical treatment, nor did they set up an appointment with a specialist in a

proper time. I was the only one involved in this incident, however as what I understand there was several

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others who had the same issue. Brian Uhlman, Andrew Tobler, and Daniel Lang are witnesses.

V. INJURIES

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

I now have Traumatic Brain Injury, PTSD, anxiety, psychosis, Tinnitus and floaters in my eyes.

VI. RELIEF

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

I am claiming \$750,000.00 in Damages against Kitsap County for their lack of monitoring and allowing me to be permanently hurt \$1,000,000.00 against WellPath for Civil Rights violation of the Eighth Amendment by withholding medical treatment that was needed.

VII. CERTIFICATION AND CLOSING

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

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I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:

09-29-2020

Signature of Plaintiff

Brandon R. Stephenson

Printed Name of Plaintiff

Brandon R. Stephenson

Date of signing:

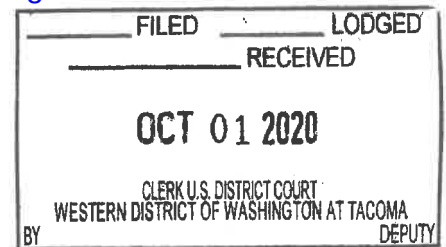
Signature of Plaintiff

Printed Name of Plaintiff

Date of signing:

Signature of Plaintiff

Printed Name of Plaintiff



Attachment 1.

1 monitor and audit WellPath in every aspect to ensure that each inmate at
2 the jail received proper treatment and they did not. Because they did not
3 do their job, they allowed continued mistreatment from WellPath.
4 I was not given my medication for Tourette's and Epilepsy which
5 are chronic conditions and it was clear that I had these conditions.
6 There is documentation of me alerting medical staff and my mother even
7 called and let them know of my medical conditions and medications I
8 was taking. Accordingly, medical staff tried to get medical documents
9 but were unable to find any, however my Lawyer, Kimberly Sloan from
10 the Kitsap County Public Defender's Office found them with no problem
11 and provided a copy to the medical staff. They still refused to provide
12 me my medication and medical treatment. On February 8th, 2016 I was
13 found in my cell on the floor unconscious with a pool of blood around
14 my head by my roommate, Brian Uhlman. I met Brian at Monroe
15 Correction Complex, Minimum Security Unit in August of 2019
16 before he left. He said he knew me, but I did not know him and he
17 explained to me what happened in the Kitsap County Jail. A month
18 later, a person by the name of Andrew Tobler seen me when he moved
19 on the tier that I was living in. He confirmed everything I was told by
20 Brian Uhlman. Both said they seen the mistreatment that was going on.
21 Andrew Tobler said there was a man by the name of Daniel Lang
22 who also was a witness to the mistreatment. Brian said that when he
23 found me on the floor in the cell, he alerted guards and they came in
24 and locked the place down. He said they were in there for 20 seconds
25 and then he heard them calling for Medical for an emergency. He said
26 from that point, it took Medical 10 minutes to get down to where we
27 were. He said medical was in there for 5 minutes and then a team
28 of EMT's were there taking me on a stretcher to a hospital. He said I was returned
29 that night, but was calmer, not shaking my head from Tourette's but I was
30 unresponsive as like I was not there in person. He said from that day on
31 I was not the person who I was before the incident. Both Brian and
32 Andrew both confirm that the jail staff made me walk along the walls to get to where
33 I needed to go before they finally gave me a wheelchair after I came back from
34 Western State Hospital. Before Wester Sate Hospital they said I rarely came out
35 Of the room as I was unable to get around properly, and I didn't take showers because
36 I could not. There is no record of this incident in the Jail Records from the Medical
37 Staff, however, there is records from the hospital I was taken to. Furthermore, this
38 Medical company no longer works at the jail as their contract was terminated shortly
39 after this.

Brandon Stephenson
3814 Eckmansville Rd
Winchester, OH 45697

TACOMA WA 983
OLYMPIA WA
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U.S. District Court
1717 Pacific Ave
Tacoma, WA 98402

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BY	DEPUTY

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